IOE INFORMATION TO MEMBERS ON THE INFLUENZA A (H1N1) DEVELOPMENTS

Update 15 June 2009


Latest update

The WHO has just raise the level of influenza pandemic alert from phase 5 to phase 6. This is the highest level of alert. To see what this means please consult http://www.who.int/csr/disease/influenza/GIPA3AideMemoire.pdf.

Even so this should be put in context with the fact that normally, there are no completely reliable figures on confirmed diagnosed influenza cases and with few exceptions, countries with large numbers of influenza A (H1N1) cases are those with good surveillance and testing procedures in place.

The advice still remains that WHO is not recommending travel restrictions related to the outbreak of the influenza A(H1N1) virus. Limiting travel and imposing travel restrictions would have very little effect on stopping the virus from spreading, but would be highly disruptive to the global community.

The WHO does not believe entry and exit screenings would work to reduce the spread of this disease. However country-level measures to respond to a public health risk are the decision of national authorities

People who are ill should delay travel plans. Returning travellers who become ill should contact their health care provider.

Travellers can protect themselves and others by following simple prevention practices that apply while travelling and in daily life.

15 June 2009
Further update will be provided if there are significant developments. For further information contact asherson@ioe-emp.org

Keep informed of developments nationally

The situation is developing rapidly and is different from country to country. Employers should keep informed of the national developments and can play their part in cooperating with the authorities and providing information to their workforce. Some

countries have provided public health advice regarding school closures, avoiding crowds and other social distancing measures. But check with your authorities so that you support current best practice and avoid overreaction.

The current advice still remains valid.

- ✓ Anyone who is ill should not come to work and if they become ill at work they should seek medical attention. They should not return until their condition has been diagnosed and treated.

- ✓ Support and reinforce the national communications campaigns and advise employees to follow good hygiene practices. These will help to slow the spread of the virus and will be the single most effective thing individuals can do to protect themselves and others from infection.

People should
- ✓ Always carry tissues.
- ✓ Use clean tissues to cover their mouths and noses when they cough and sneeze.
- ✓ Bin the tissues after one use.
- ✓ Wash hands with soap and hot water or a sanitiser gel often.

The World Health Organisation (WHO) headquartered here in Geneva currently advises no restriction of regular travel or closure of borders. It is considered prudent for people who are ill to delay international travel and for people developing symptoms following international travel to seek medical attention, in line with guidance from national authorities. Travellers can protect themselves and others by following simple prevention practices that apply while travelling and in daily life

Guidance on protecting your employees and business from pandemic human influenza

ILO guidance

Following previous influenza outbreaks, an ILO project in Thailand developed an Action Manual for Small and Medium-sized Enterprises. It contains useful information that can be adapted to the current situation and it can be downloaded in pdf format from http://www.ilo.org/asia/whatwedo/publications/lang--en/docName--WCMS_101422/index.htm.

WHO guidance

WHO is coordinating the global response to influenza A (H1N1). Information on the website

http://www.who.int/csr/disease/swineflu/en/index.html is tracking the evolving situation and provides access to both technical guidelines and information useful for the general public.

In health care settings the use of suitable masks could reduce the transmission of influenza, but in the community the benefits of wearing masks has not been established. Nonetheless, many individuals may wish to wear masks and they are a useful reminder of the need for good hygiene practices but are only effective if used with them.

Pork, pork products and trade

Pork and pork products, handled in accordance with good hygienic practices recommended by international bodies will not be a source of infection. The influenza A(H1N1) has not been shown to be transmissible to people through eating properly handled and prepared pork (pig meat) or other products derived from pigs. It is killed by cooking temperatures of 160°F/70°C, corresponding to general guidance for meat preparation. As for all meat products, meat from sick pigs or those found dead should not be processed or used for human consumption under any circumstances.

It is important that the international community respect the latest official advice, based on careful scientific evaluation that trade restrictions and measures affecting pork and pork products consumption are unnecessary

BACKGROUND INFORMATION

Rapidly changing situation

This particular H1N1 strain is entirely new and has not circulated previously in humans. The virus is contagious, spreading easily from one person to another, and from one country to another. As of today, nearly 30,000 confirmed cases have been reported in 74 countries.

Spread in several countries can no longer be traced to clearly-defined chains of human-to-human transmission. Further spread is considered inevitable but it is under close and careful watch.

On present evidence, the overwhelming majority of patients experience mild symptoms and make a rapid and full recovery, often in the absence of any form of medical treatment. The novel H1N1 virus preferentially infects younger people. In nearly all areas with large and sustained outbreaks, the majority of cases have occurred in people under the age of 25 years. In most cases of severe and fatal infections have been in adults between the ages of

30 and 50 years. Many, though not all, severe cases have occurred in people with underlying chronic conditions.

Symptoms of swine flu
Some of the symptoms are the sudden onset of fever, cough or shortness of breath. Other symptoms can include headache, sore throat, tiredness, aching muscles, chills, sneezing, runny nose or loss of appetite. These symptoms can also occur for other reasons and should be checked by the medical authorities

A balanced approach
Because it's a new virus, no one will have immunity to it and everyone could be at risk of catching it.

Flu viruses are made up of tiny particles that can be spread through the droplets from sneezing or coughing. They can be transferred from hand to any hard surfaces that are touched and since they can live on those surfaces for some time they can be spread by contact.

Antiviral drugs
Many countries have been stockpiling antiviral drugs for use in this situation. They are not a cure, but they help recovery if taken within 48 hours of symptoms developing, by:

- ✓ Relieving some of the symptoms.
- ✓ Reducing the length of time of illness by around one day.
- ✓ Reducing the potential for serious complications, such as pneumonia

So far most people who have contracted the new A (H1N1) virus have experienced influenza-like symptoms (such as sore throat, cough, runny nose, fever, malaise, headache, joint/muscle pain) and recovered without antiviral treatment. Influenza A (H1N1) is a new virus and only a small number of people with the infection have been treated for it with antiviral drugs. WHO is in touch with public health authorities and clinicians in affected countries and is gathering information about how effective the drugs are.

There are two classes of antiviral drugs for influenza: inhibitors of neuraminidase such as oseltamivir and zanamivir; and adamantanes, such as amantadine and rimantadine. Tests on viruses obtained from patients in Mexico and the United States have indicated that current new H1N1 viruses are sensitive to neuraminidase inhibitors, but that the viruses are resistant to the other class, the adamantanes. Therefore antiviral drugs are to be used according to national pandemic influenza preparedness plans. Public health authorities in some countries have decided to treat patients likely to have this disease as a part of public health measures.

Vaccines

Scientists are working on the development of vaccines but currently no vaccine is available to prevent this flu as each vaccine has to be specific to the virus and these are constantly mutating. Making a completely new influenza vaccine can take five to six months.

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